



1. TYPE OF APPLICATION AND FEES. Mark the type of license you would like in addition to the license(s) you currently hold. This form will be returned unprocessed if the fee is not included or if the fee is less than required. Make check or money order payable to: Assessment Systems, Inc. **CASH PAYMENTS WILL NOT BE ACCEPTED.**

Total Fee Due		<p align="center">Make fee payable to Assessment Systems Inc. A charge of \$50.00 will be imposed for dishonored checks (Public Law 89-208) Mail form and fee to: ASI/DC Real Estate Board MetroPlex II, 8201 Corporate Drive, Suite 400 Landover, MD 20785 1(888) 204-6192</p>
<input type="checkbox"/> Associate Broker (AB)	\$240.00	
<input type="checkbox"/> Independent Broker (IB)	\$240.00	
<input type="checkbox"/> Principal Broker (PB)	\$240.00	
<input type="checkbox"/> Property Manager (PM)	\$240.00	

2A. NAME - If your name has changed, you must provide a notarized copy of the legal name change document (e.g., marriage certificate, divorce decree, etc.)																																	
FIRST NAME										LAST NAME										MI.													

[illegible]

2B. Social Security Number*									2C. Birthdate						2D. Original License															
									(Month)			(Day)			(Year)			(Prefix-SP, PB, AB, IB, PM)				(License Number)								

3A. RESIDENTIAL ADDRESS — A street address MUST be provided.																													
STREET ADDRESS LINE 1 (If applicable, use this line to indicate APARTMENT, SUITE, or FLOOR#)																													

[illegible][illegible][illegible]

3B. BUSINESS ADDRESS (Broker Companies, Independent Brokers, and Property Managers ONLY). A street address MUST be provided.																													
STREET ADDRESS LINE 1 (If applicable, use this line to indicate APARTMENT, SUITE, or FLOOR #)																													

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*Under the authority of Public Law 93-579 Section 7(b), the Department of Consumer and Regulatory Affairs requests your Social Security Number/FEIN to assist in the administration of D.C. tax laws. Disclosure is not required as part of the licensing process and will not be made available to the public.

**DISTRICT OF COLUMBIA
REAL ESTATE BOARD
DUAL LICENSE APPLICATION**

4. SCREENING QUESTION – The following questions must be completed by all applicants. <i>If you answer “YES” to any questions below, provide a complete explanation on a separate sheet of paper.</i>				
A.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Have you (or if company, any officer of the company) been arrested, indicted or convicted of a crime (other than minor traffic violations) since your last renewal?	ASI ONLY O
B.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Has any state denied your application for a license, or taken disciplinary action against your license since your last renewal?	ASI ONLY O

5. SPONSORING BROKER'S STATEMENT – To be completed by the broker who employs or will employ the Principal Broker, Associate Broker or Property Manager applicant.	
<div style="text-align: right;">This license will have the following role in the company: <input type="checkbox"/> Associate Broker <input type="checkbox"/> Principal Broker <input type="checkbox"/> Property Manager</div> <div>_____ COMPANY NAME</div> <div>_____ COMPANY LICENSE NUMBER COMPANY FEIN</div> <div>I have read this application in full. In my opinion, _____, the applicant, is honest, truthful, and of good reputation, and I recommend that the license be granted.</div> <div>_____ PRINCIPAL BROKER'S SIGNATURE DATE</div>	

6. AFFADAVIT OF APPLICANT —This form will be returned unprocessed if the form if not signed by the applicant and notarized. Keep a photocopy of this form for your records.	
<div>I, _____, being duly sworn, depose and say: That the information given in this application, including all writing and exhibits attached hereto, is true and complete.</div> <div>_____ APPLICANTS SIGNATURE DATE</div> <div>State: _____ Subscribed and sworn to before me this _____ day of _____ (month), _____ (year) by the affiant, who personally appeared before me.</div> <div>_____ NOTARY PUBLIC SIGNATURE MY BOARD EXPIRES (SEAL)</div>	ASI ONLY O

ASI ONLY Clerk's Initials _____
